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APPLICANTS

Jeffrey Brian Sampsell, San Francisco, CA;

 Clarence Chui, San Mateo, CA;
 Manish Kothari, Redwood City, CA;

** CONTINUING DATA *****

None U.S.

** FOREIGN APPLICATIONS *****

None U.S.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 31 20	INDEPENDENT CLAIMS 8 10
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

 20995
 KNOBBE MARTENS OLSON & BEAR LLP
 2040 MAIN STREET
 FOURTEENTH FLOOR
 IRVINE, CA
 92614

TITLE

Area array modulation and lead reduction in interferometric modulators

FILING FEE RECEIVED 899	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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